

UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY

NORTH JERSEY SURGERY CENTER,
Plaintiff

V.

**SUMMONS ON AMENDED
COMPLAINT**

**HORIZON BLUE CROSS BLUE SHIELD OF
NEW JERSEY, ET AL.,**
Defendant

CASE NUMBER: **2:12-CV-06787-DMC-JAD**

TO: *(Name and address of Defendant):*

A lawsuit has been filed against you.

Unless otherwise prescribed by rule, within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States Agency, or an office or employee of the United States described in Fed. R. civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached amended complaint or a motion under rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

If you fail to respond, judgment by default will be entered against you for the relief demanded in the amended complaint. You also must file your answer or motion with the court.

WILLIAM T. WALSH

CLERK



Jane DelleMonache

(By) DEPUTY CLERK

ISSUED ON 2013-08-08 15:49:15.0, Clerk
USDC NJD

RETURN OF SERVICEService of the Summons and complaint was made by me⁽¹⁾

DATE

NAME OF SERVER (*PRINT*)

TITLE

Check one box below to indicate appropriate method of service

- ☐ Served personally upon the defendant. Place where served: _____

- ☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
- ☐ Name of person with whom the summons and complaint were left: _____
- ☐ Returned unexecuted: _____

- ☐ Other (specify) : _____

STATEMENT OF SERVICE FEES

TRAVEL

SERVICES

TOTAL

DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on

Date_____
*Signature of Server*_____
Address of Server